

## General

### Title

Initiation of alcohol and other drug (AOD) treatment: percentage of patients who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient service or partial hospitalization within 14 days of the diagnosis.

### Source(s)

National Committee for Quality Assurance (NCQA). HEDIS 2015 technical specifications for ACO measurement. Washington (DC): National Committee for Quality Assurance (NCQA); 2014. various p.

## Measure Domain

### Primary Measure Domain

Clinical Quality Measures: Access

### Secondary Measure Domain

Clinical Quality Measure: Process

## Brief Abstract

### Description

This measure is used to assess the percentage of adolescent and adult patients who initiate treatment through an inpatient alcohol and other drug (AOD) admission, outpatient visit, intensive outpatient service or partial hospitalization within 14 days of the diagnosis.

See the related National Quality Measures Clearinghouse (NQMC) summary of the National Committee for Quality Assurance (NCQA) measure [Engagement of alcohol and other drug \(AOD\) treatment: percentage of patients who initiated treatment and who had two or more additional services with a diagnosis of AOD within 30 days of the initiation visit](#).

Note from the National Quality Measures Clearinghouse (NQMC): For this measure, there are both Electronic and Hybrid Specifications. This NQMC measure summary is based on the Electronic specification. Refer to the original measure documentation for details pertaining to the Hybrid specification.

## Rationale

There are more deaths, illnesses and disabilities from substance abuse than from any other preventable health condition. Treatment of medical problems caused by substance abuse places a huge burden on the health care system (Schneider Institute for Health Policy & Brandeis University, 2001).

Identifying people with alcohol and other drug (AOD) disorders is an important first step in the process of care, but identification often does not lead to initiation of care (McCorry et al., 2000). Someone may not initiate treatment because of the social stigma associated with AOD disorders, denial of the problem or lack of immediately available treatment services (McCorry et al., 2000). This measure is designed to ensure that treatment is initiated once the need has been identified, and permits comparison of effectiveness in initiating care.

## Evidence for Rationale

McCorry F, Garnick DW, Bartlett J, Cotter F, Chalk M. Developing performance measures for alcohol and other drug services in managed care plans. Washington Circle Group. Jt Comm J Qual Improv. 2000 Nov;26(11):633-43. [PubMed](#)

National Committee for Quality Assurance (NCQA). HEDIS 2015: Healthcare Effectiveness Data and Information Set. Vol. 1, narrative. Washington (DC): National Committee for Quality Assurance (NCQA); 2014. various p.

Schneider Institute for Health Policy, Brandeis University. The nation's number one health problem. Princeton (NJ): Robert Wood Johnson Foundation; 2001.

## Primary Health Components

Alcohol and other drug (AOD) dependence; initiation of treatment; adolescents

## Denominator Description

Adolescent and adult patients age 13 years and older as of December 31 of the measurement year, with a Negative Diagnosis History, with a new episode of alcohol or other drug (AOD) dependence during the Intake Period (see the related "Denominator Inclusions/Exclusions" field)

## Numerator Description

Initiation of alcohol and other drug (AOD) treatment through an inpatient admission, outpatient visit, intensive outpatient encounter, or partial hospitalization within 14 days of diagnosis (see the related "Numerator Inclusions/Exclusions" field)

## Evidence Supporting the Measure

### Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

# Additional Information Supporting Need for the Measure

Unspecified

## Extent of Measure Testing

All HEDIS measures undergo systematic assessment of face validity with review by measurement advisory panels, expert panels, a formal public comment process and approval by the National Committee for Quality Assurance's (NCQA's) Committee on Performance Measurement and Board of Directors. Once NCQA establishes national benchmarks for accountable care organization (ACO) performance, all measures will undergo formal reliability testing of the performance measure score using beta-binomial statistical analysis. Where applicable, measures also are assessed for construct validity using the Pearson correlation test.

## Evidence for Extent of Measure Testing

Rehm B. (Assistant Vice President, Performance Measurement, National Committee for Quality Assurance, Washington, DC). Personal communication. 2015 Apr 8. 1 p.

## State of Use of the Measure

### State of Use

Current routine use

### Current Use

not defined yet

## Application of the Measure in its Current Use

### Measurement Setting

Accountable Care Organizations

Ambulatory/Office-based Care

Emergency Department

Hospital Inpatient

Hospital Outpatient

Substance Use Treatment Programs/Centers

### Professionals Involved in Delivery of Health Services

not defined yet

## Least Aggregated Level of Services Delivery Addressed

Multisite Health Care or Public Health Organizations

## Statement of Acceptable Minimum Sample Size

Specified

## Target Population Age

Age greater than or equal to 13 years

## Target Population Gender

Either male or female

## National Strategy for Quality Improvement in Health Care

### National Quality Strategy Aim

Better Care

### National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

## Institute of Medicine (IOM) National Health Care Quality Report Categories

### IOM Care Need

Getting Better

Living with Illness

### IOM Domain

Effectiveness

## Data Collection for the Measure

### Case Finding Period

January 1 to November 15 of the measurement year

# Denominator Sampling Frame

Patients associated with provider

## Denominator (Index) Event or Characteristic

Clinical Condition

Encounter

Institutionalization

Patient/Individual (Consumer) Characteristic

Therapeutic Intervention

## Denominator Time Window

not defined yet

## Denominator Inclusions/Exclusions

### Inclusions

Adolescent and adult patients age 13 years and older as of December 31 of the measurement year, with a Negative Diagnosis History, with a new episode of alcohol or other drug (AOD) dependence during the Intake Period

Note:

Identify all patients in the specified age range who during the Intake Period had one of the following:

An outpatient visit, intensive outpatient visit or partial hospitalization with a diagnosis of AOD. Any of the following code combinations meet criteria:

IET Stand Alone Visits Value Set with AOD Dependence Value Set

IET Visits Group 1 Value Set with IET POS Group 1 Value Set and AOD Dependence Value Set

IET Visits Group 2 Value Set with IET POS Group 2 Value Set and AOD Dependence Value Set

A detoxification visit (Detoxification Value Set)

An emergency department (ED) visit (ED Value Set) with a diagnosis of AOD (AOD Dependence Value Set)

An inpatient discharge with a diagnosis of AOD as identified by either of the following:

An inpatient discharge with a diagnosis of AOD (AOD Dependence Value Set)

An inpatient discharge with an AOD procedure code (AOD Procedures Value Set)

**IESD:** The earliest date of service for an inpatient, intensive outpatient, partial hospitalization, outpatient, detoxification or ED visit during the Intake Period with a diagnosis of AOD.

*For an outpatient, intensive outpatient, partial hospitalization, detoxification, or ED visit (not resulting in an inpatient stay), the IESD is the date of service.*

*For an inpatient (acute or nonacute) stay, the IESD is the date of discharge.*

*For an ED visit that results in an inpatient stay, the IESD is the date of the inpatient discharge.*

*For direct transfers, the IESD is the discharge date from the second admission.*

**Intake Period:** January 1 to November 15 of the measurement year. The Intake Period is used to capture new episodes of AOD.

**Negative Diagnosis History:** A period of 60 days (2 months) before the IESD when the patient had no visits or stays with a diagnosis of AOD dependence.

*For an inpatient stay, use the admission date to determine the Negative Diagnosis History.*

*For ED visits that result in an inpatient stay, use the ED date of service to determine the Negative Diagnosis History.*

*For direct transfers, use the first admission to determine the Negative Diagnosis History.*

Refer to the original measure documentation for steps to identify the eligible population.

### Exclusions

**Test for Negative Diagnosis History.** Exclude patients who had a claim/encounter with a diagnosis of AOD (AOD Dependence Value Set) during the 60 days (2 months) before the IESD.

Exclude patients if the initiation of treatment event is an inpatient stay with a discharge date after December 1 of the measurement year.

### Value Set Information

Measure specifications reference value sets that must be used for HEDIS reporting. A value set is the

complete set of codes used to identify the service(s) or condition(s) included in the measure. Refer to the [NCQA Web site](#)  to purchase *HEDIS 2015 Technical Specifications for ACO Measurement*, which includes the Value Set Directory.

## Exclusions/Exceptions

not defined yet

## Numerator Inclusions/Exclusions

### Inclusions

Initiation of alcohol and other drug (AOD) treatment through an inpatient admission, outpatient visit, intensive outpatient encounter, or partial hospitalization within 14 days of diagnosis

Note:

*If the Index Episode was an inpatient discharge*, the inpatient stay is considered initiation of treatment and the patient is compliant.  
*If the Index Episode was an outpatient, intensive outpatient, partial hospitalization, detoxification or emergency department (ED) visit*, the patient must have an inpatient admission, outpatient visit, intensive outpatient encounter, or partial hospitalization, with a diagnosis of AOD, within 14 days of the Index Episode Start Date (IESD) (inclusive). If the IESD and the initiation visit occur on the same day, they must be with different providers in order to count. Any of the following code combinations meet criteria:

An inpatient admission with a diagnosis of AOD (AOD Dependence Value Set)

IET Stand Alone Visits Value Set with AOD Dependence Value Set

IET Visits Group 1 Value Set with IET POS Group 1 Value Set and AOD Dependence Value Set

IET Visits Group 2 Value Set with IET POS Group 2 Value Set and AOD Dependence Value Set

*If the initiation of treatment event is an inpatient admission*, the admission date (not the discharge date) must be within 14 days of the IESD (inclusive).

*Index Episode*: The earliest inpatient, intensive outpatient, partial hospitalization, outpatient, detoxification or ED visit during the Intake Period with a diagnosis of AOD.

### Exclusions

Do not count events that include inpatient detoxification or detoxification codes (Detoxification Value Set) when identifying initiation of treatment.

### Value Set Information

Measure specifications reference value sets that must be used for HEDIS reporting. A value set is the complete set of codes used to identify the service(s) or condition(s) included in the measure. Refer to the [NCQA Web site](#)  to purchase *HEDIS 2015 Technical Specifications for ACO Measurement*, which includes the Value Set Directory.

## Numerator Search Strategy

Fixed time period or point in time

## Data Source

Administrative clinical data

Electronic health/medical record

Paper medical record

## Type of Health State

Does not apply to this measure

## Instruments Used and/or Associated with the Measure

Unspecified

## Computation of the Measure

### Measure Specifies Disaggregation

Does not apply to this measure

### Scoring

Rate/Proportion

### Interpretation of Score

Desired value is a higher score

### Allowance for Patient or Population Factors

not defined yet

### Description of Allowance for Patient or Population Factors

The Accountable Care Organization (ACO) aggregate population is reported as a whole, with an option to report Medicaid separately for measures for which HEDIS Health Plan Measurement offers Medicaid specifications.

The measure has two age stratifications and a total rate:

13 to 17 years
18 years and older
Total

The total is the sum of the numerators divided by the sum of the denominators.

### Standard of Comparison

not defined yet

## Identifying Information

### Original Title

Initiation and engagement of alcohol and other drug dependence treatment (AIET): initiation of AOD treatment.

### Measure Collection Name

HEDIS 2015: Accountable Care Organization (ACO) Collection

## Measure Set Name

Effectiveness of Care

## Measure Subset Name

Access and Availability

## Submitter

National Committee for Quality Assurance - Health Care Accreditation Organization

## Developer

National Committee for Quality Assurance - Health Care Accreditation Organization

## Funding Source(s)

Unspecified

## Composition of the Group that Developed the Measure

National Committee for Quality Assurance's (NCQA's) Measurement Advisory Panels (MAPs) are composed of clinical and research experts with an understanding of quality performance measurement in the particular clinical content areas.

## Financial Disclosures/Other Potential Conflicts of Interest

In order to fulfill National Committee for Quality Assurance's (NCQA's) mission and vision of improving health care quality through measurement, transparency and accountability, all participants in NCQA's expert panels are required to disclose potential conflicts of interest prior to their participation. The goal of this Conflict Policy is to ensure that decisions which impact development of NCQA's products and services are made as objectively as possible, without improper bias or influence.

## Endorser

National Quality Forum - None

## NQF Number

not defined yet

## Date of Endorsement

2016 Feb 8

## Adaptation

This measure was adapted from the *HEDIS Technical Specifications for Health Plans* ("*HEDIS Health Plan*



Measurement") and *HEDIS Physician Measurement*.

## Date of Most Current Version in NQMC

2014 Nov

## Measure Maintenance

Annual

## Date of Next Anticipated Revision

Unspecified

## Measure Status

This is the current release of the measure.

This measure updates a previous version: National Committee for Quality Assurance (NCQA). HEDIS 2013 technical specifications for ACO measurement. Washington (DC): National Committee for Quality Assurance (NCQA); 2012. various p.

The measure developer reaffirmed the currency of this measure in November 2015.

## Measure Availability

Source available for purchase from the [National Committee for Quality Measurement \(NCQA\) Web site](#)

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For more information, contact NCQA at 1100 13th Street, NW, Suite 1000, Washington, DC 20005; Phone: 202-955-3500; Fax: 202-955-3599; Web site: [www.ncqa.org](http://www.ncqa.org) .

## NQMC Status

This NQMC summary was completed by ECRI Institute on June 11, 2014.

This NQMC summary was updated by ECRI Institute on April 16, 2015.

The information was reaffirmed by the measure developer on November 2, 2015.

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## Production

### Source(s)

National Committee for Quality Assurance (NCQA). HEDIS 2015 technical specifications for ACO measurement. Washington (DC): National Committee for Quality Assurance (NCQA); 2014. various p.

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